

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>06/13/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		<i>65918 21</i>	<i>6/19/00</i>
RESPONSE FORMALITY REVIEW			<i>8-23-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date			
Final	Original	5	12	2
1	✓	✓	✓	✓
2	✓	✓	✓	✓
3	✓	✓	✓	✓
4	✓	✓	✓	✓
5	✓	✓	✓	✓
6	✓	✓	✓	✓
7	✓	✓	✓	✓
8	✓	✓	✓	✓
9	✓	✓	✓	✓
10	✓	✓	✓	✓
11	✓	✓	✓	✓
12	✓	✓	✓	✓
13	✓	✓	✓	✓
14	✓	✓	✓	✓
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Claim	Date			
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If more than 150 claims or 10 actions
staple additional sheet here

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